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PATENT**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****In re Application of:**

Nielson et al.

Serial No.: 10/801,948**Filed:** March 15, 2004**For:** REACTIVE MATERIAL ENHANCED
MUNITION COMPOSITIONS AND
PROJECTILES CONTAINING SAME**Confirmation No.:** 2920**Examiner:** Unknown**Group Art Unit:** 3641**Attorney Docket No.:** 2507-6358US**CERTIFICATE OF MAILING**

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March 7, 2005
Date

Shawnee MacDonald
Name (Type/Print)**PRELIMINARY AMENDMENT**

Mail Stop Amendment
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Sir:

Please revise the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 11 of this paper.

Please type a plus sign (+) inside this box →

Approved for use through 10/31/2002. OMB 0651-0031

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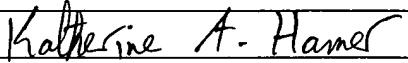
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	Application Number	10/801,948
	Filing Date	March 15, 2004
	First Named Inventor	Nielson et al.
	Group Art Unit	3641
	Examiner Name	
	Attorney Docket Number	2507-6358US (22043-US)

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Postcard receipt acknowledgment (attached to the front of this transmittal) <input checked="" type="checkbox"/> Duplicate copy of this transmittal sheet in the event that additional filing fees are required under 37 C.F.R. § 1.16 <input checked="" type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Response to Restriction Requirement/Election of Species Requirement dated <input type="checkbox"/> Amendment in response to office action dated <input type="checkbox"/> Amendment under 37 C.F.R. § 1.116 in response to final office action dated <input type="checkbox"/> Additional claims fee - Check No. in the amount of \$ <input type="checkbox"/> Letter to Chief Draftsman and copy of FIGS. with changes made in red <input type="checkbox"/> Transmittal of Formal Drawings <input type="checkbox"/> Formal Drawings (sheets)	<input type="checkbox"/> Information Disclosure Statement, PTO/SB/08A (08-00); <input type="checkbox"/> copy of cited references <input type="checkbox"/> Supplemental Information Disclosure Statement; PTO/SB/08A (08-00); copy of cited references and Check No. in the amount of \$180.00 <input type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> Petition for Extension of Time and Check No. in the amount of \$ <input type="checkbox"/> Petition <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Katherine A. Hamer	Registration No. 47,628
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